



alameda recreation and park department - (510) 747-7529

elves workshop

come and enjoy making special holiday treats, sing songs, play games and work on a special holiday gift to bring home at the end of the camp



for boys and girls ages 3 to 5 years
pre-kindergarten

tuesday to friday, december 13 to 16, 2011

9:00 a.m. to 12:00 noon

cost: \$72.50 per child

instructors: arpd tiny tot staff

important - your child (or children) must be able to separate from parents and be able to take direction from other adults as well as be potty trained



locations:
godfrey center
281 beach road
bay farm island

woodstock center
351 cypress street
(3rd st & cypress st)

pre-registration required! limited space available!
registration deadline: thursday, december 8, 2011

note: since supplies must be purchased for all campers, refunds or credits will not be issued after december 8th



REGISTRATIONS AND PAYMENTS ACCEPTED:

1. By Mail or In Person: ARPD Office, 2226 Santa Clara Ave, Alameda, 94501
Office Hours: Monday through Thursday; 8:00 a.m. to 6:00 p.m. (CLOSED ON FRIDAYS)
 2. By Fax: (510) 523-4071 with your completed registration form and current MasterCard or VISA
 3. Online: www.arpdeplay.com with your MasterCard or VISA
- Proof of age required unless you have already shown proof of age for Small Frys/Tiny Tots Program.

Please complete and return form with payment (cash, check made payable to ARPD, MasterCard or VISA) no later than **THURSDAY, DECEMBER 8, 2011** to the Alameda Recreation and Park Department, 2226 Santa Clara Ave, Alameda 94501. FAX registrations accepted with VISA/MasterCard: (510) 523-4071. **SAVE YOUR RECEIPTS! THERE IS A \$5 SERVICE CHARGE PER RECEIPT TO REPRINT RECEIPTS.** ARPD reserves the right to cancel programs due to low enrollment. Alternate programs may not be available.

CANCELLATION POLICY: In the event a class is cancelled by ARPD, full refunds will be issued. There will be a \$15 administration fee for any class/camp changes, withdrawals or refund request. Refunds will not be issued for cancellations initiated by participants as credits will be applied to your ARPD account for any future ARPD programs.

I hereby give my child permission to participate in the ELVES WORKSHOP program sponsored by the Alameda Recreation and Park Department on Tuesday, December 13 to Friday, December 16, 2011 from 9:00 a.m. to 12:00 noon at the following park site:

PLEASE CHECK ONE:

☐ GODFREY (#10522)

☐ WOODSTOCK (#10523)

CHILD'S NAME: _____ ☐ BOY ☐ GIRL BIRTHDATE: ____/____/____ AGE: ____ MOS: ____ STAFF VERIF: _____

ADDRESS: _____ CITY: _____ ZIP: _____ HOME PHONE: (____) _____

Please note: Registrations for children requiring special attention are reviewed on a case-by-case basis with the Program Supervisor. Be sure to provide as much detail as possible, including any physical or emotional needs or medications involved. Recreation Department Staff do not receive specialized training for various special needs, but will work with individuals as appropriate to provide a positive experience.

ALLERGIES, MEDICAL PROBLEMS: _____

PERSONS AUTHORIZED TO PICK-UP CHILD FROM PROGRAM: _____

MOM/GUARDIAN NAME _____ ADDRESS (if different) _____

HOME PHONE (if different) (____) _____ WORK PHONE (____) _____ CELL PHONE (____) _____

DAD/GUARDIAN NAME _____ ADDRESS (if different) _____

HOME PHONE (if different) (____) _____ WORK PHONE (____) _____ CELL PHONE (____) _____

IN CASE OF EMERGENCY AND I CANNOT BE REACHED, PLEASE CONTACT: (I understand it is my responsibility to provide current contact information)

NAME: _____ RELATIONSHIP: _____ HOME PHONE: (____) _____ CELL OR WORK: (____) _____

1. THE UNDERSIGNED HEREBY RELEASES, WAIVES AND DISCHARGES THE CITY OF ALAMEDA, its directors, officers, employees, agents, and independent contractors from all liability to the undersigned and/or his/her personal representatives, assignees, heirs, and next of kin for any loss or damage and any claim or demands accruing or resulting from injury to the person or property or death of the undersigned, whether or not caused by the negligence and/or property of the City of Alameda, its directors, officers, employees, agents, and independent contractors.

2. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE, whether or not it is due to the negligence of the City of Alameda, its directors, officers, employees, agents, and independent contractors or otherwise while in, upon or about the premises of the City of Alameda and/or while using the premises or facilities or equipment or program transportation thereon.

3. THE UNDERSIGNED HEREBY PERMITS the taking of photographs of themselves and/or the participant by the City of Alameda during recreation classes or activities to be used at the City's discretion.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements or inducement apart from the foregoing written agreement has been made.

PARENT/GUARDIAN SIGNATURE _____ DATE _____

PAYMENT ENCLOSED: CASH _____ CHK# _____ MC/VISA _____ EXP DATE _____